Case 16-13338 Doc 1 Filed 04/19/16 Entered 04/19/16 16:57:09 Desc Main Page 1 of 72 Fill in this information to identify your case: FILED United States Bankruptcy Court for the: UNITED STATES BANKRUPTCY COURT District of (State) NORTHERN DISTRICT OF ILLINOIS APR 19 2016 Case number (If known): Chapter you are filing under: Chapter 7 ☐ Chapter 11 JEFFREY P. ALLSTEADT, CLERK Chapter 12 Check if this is an Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your government-issued picture identification (for example, First name your driver's license or passport). Middle name Bring your picture identification to your meeting Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., 11, 111) 2. All other names you have used in the last 8 First name years Include your married or Middle name Middle name maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - Q 762 your Social Security number or federal OR Individual Taxpayer 9 xx - xx -Identification number 9 xx - xx -_____ (ITIN)

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Debtor 1

First Name Middle Name Last Name

Case number (if known)_

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4	Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names		
		Business name	Business name
		EIN	EIN
Incoheli		EIN	EIN
5.	Where you live	Administration (english) with the second control of the control of	If Debtor 2 lives at a different address:
		6301 N. SHERIDAN RO. Number Street	Number Street
		# 25G	
		CHICAGO IL 60660 City State ZIP Code	City State ZIP Code
		COOK COUNTY	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
ыпис	social part, may be consistent or an activation of the constraint	City State ZIP Code	City State ZIP Code
	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1

Aimie Elizabeth Beavers
First Name Middle Name Last Name

Case number (if known)

The chapter of the Bankruptcy Code you	Check for Bai	heck one. (For a brief description of each, see <i>Notice Required by 11 U.S.C.</i> § 342(b) for Individuals Filing r Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
are choosing to file under		Chapter 7							
	🔲 Ch	apter 11							
	☐ Ch	apter 12							
gang lan albuma gegambah makawa na akawa makawa na akawa	☐ Ch	apter 13							
How you will pay the fee	you you sub with	ai court for urself, you i omitting you n a pre-prin	pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee elf, you may pay with cash, cashier's check, or money order. If your attorney is tting your payment on your behalf, your attorney may pay with a credit card or check pre-printed address.						
	□ I ne An	ed to pay	the fee in insta	allments. If yo	ou choose this o	ption, sign and attach the ents (Official Form 103A).			
	I red By less pay	quest that law, a judge than 150% the fee in	my fee be wai e may, but is no % of the official installments). If	ved (You may of required to, poverty line th you choose th	request this op waive your fee, at applies to you nis option, you n	tion only if you are filing for Chapter 7 and may do so only if your income is ar family size and you are unable to nust fill out the <i>Application to Have the</i> with your petition.			
Have you filed for	₩ No		1986 N. L. C.	kan Pikanan Pamanan kan mika kan bilikan manaya manganik	that and and the second state of the second				
bankruptcy within the last 8 years?	TYes.	District		When		Case number			
		District		When	MM / DD / YYYY	Casa number			
						Case number			
		District		When	MM / DD / YYYY	Case number			
Are any bankruptcy	M No	en i dell'aggio e di aggio i maggio i maggio e di							
cases pending or being filed by a spouse who is		Debtor				Relationship to you			
		District		When		Case number, if known			
you, or by a business partner, or by an					MM / DD / YYYY				
you, or by a business partner, or by an		Debtor			MM / DD / YYYY	Relationship to you			
you, or by a business partner, or by an						Relationship to you Case number, if known			
not filing this case with you, or by a business partner, or by an affiliate? Do you rent your residence?	₩ No.	District	12.	When	MM / DD / YYYY				
you, or by a business partner, or by an affiliate? Do you rent your		Go to line 1 Has your la	12. andlord obtained a	When	MM / DD / YYYY	Case number, if known			

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Desc Main

Debtor 1

		2 00an
Aim	e Elizabe.	th Beavers
First Name	Middle Name	Last Name

Case number (if known)

Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any	
Number Street	
City	State ZIP Code
Check the appropriate box to describe	your business;
☐ Health Care Business (as defined	in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defin	ned in 11 U.S.C. § 101(51B))
_	
Stockbroker (as defined in 11 U.S.	.C. § 101(53A))

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.

■ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4:

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

3.	What is the hazard?	w.u			

	If immediate attention is	s needed, w	hy is it needed?		
	Where is the property?			 	
	Where is the property?				
	Where is the property?			 	

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Debtor 1

Aimie Elizabeth Beavers

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ш	I am not required to receive a briefing abou
	credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to	receive	а	briefing	about
cred	it co	unselind	ιb	ecause d	of:		

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after the property of the property o

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

Case number (# known)

P	art 6: Answer These Que	stions for Reporting Purposes	•			
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.				
		16b. Are your debts primarily money for a business or inves	business debts? Busine stment or through the operati	ess debts are de ion of the busine	bts that you incurred to obtain ess or investment.	
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.				
		16c. State the type of debts you ov	we that are not consumer del	bts or business	debts.	
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Chap	ter 7. Go to line 18.	illika ta kalan ovati a kira tarpanga gro <u>mping g</u> apagayan da	ki ka ka ka ka mana da	
;	Do you estimate that after any exempt property is	administrative expenses a	7. Do you estimate that after are paid that funds will be ava	any exempt pro ailable to distribu	perty is excluded and ute to unsecured creditors?	
	excluded and administrative expenses	☐ No				
	are paid that funds will be available for distribution to unsecured creditors?	Yes				
18. 	How many creditors do you estimate that you owe?	₫ 1-49	1,000-5,000		25,001-50,000	
		☐ 50-99 ☐ 100-199	5,001-10,000 10,001-25,000		☐ 50,001-100,000 ☐ More than 100,000	
ork participal post and	YY લઈક ઇંજા કોઈ લઈક પ્રાપ્ત કરતા કરે છે. Y માર્ચિક ઇંજા કોઈ લઈક પ્રાપ્ત કરતા કરતા કરતા કરતા કરતા કરતા કરતા કરત	200-999		_	iviore trail 100,000	
	How much do you	\$0-\$50,000	□ \$1,000,001-\$10 million		3 \$500,000,001-\$1 billion	
	estimate your assets to be worth?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million		\$1,000,000,001-\$10 billion	
D-H-MINE	ASSENSATARISMENT POST CONTRACTOR	□ \$500,001-\$300,000	\$100,000,001-\$100 mil	_	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion	
	How much do you	\$0-\$50,000	☐ \$1,000,001-\$10 million		3 \$500,000,001-\$1 billion	
	estimate your liabilities to be?	\$50,001-\$100,000	\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion	
		\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million		☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion	
Pa	1378 Sign Below	•			- Word their 400 billion	
Fo	r you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.				
		If I have chosen to file under Chapte of title 11, United States Code. I und under Chapter 7.	er 7, I am aware that I may p derstand the relief available t	roceed, if eligibl under each chap	le, under Chapter 7, 11,12, or 13 oter, and I choose to proceed	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		I understand making a false statem with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and	i fines up to \$250,000, or imp	obtaining money orisonment for u	or property by fraud in connection p to 20 years, or both.	
		* Climit	aures x			
		Signature of Debtor 1		Signature of Deb	otor 2	
Arbikishis		Executed on <u>04 /0 20</u> MM / DD / YYY	<u>N</u> E	Executed onM	M / DD /YYYY	

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Debtor 1

Air	rie Elizak	eth Beavers	
irst Name	Middle Morse	Local Atamara	

Case number (if known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attorney for Debtor		MM / DD /YYYY
Printed name		
Firm name		
Number Street		
City	State	ZIP Code
Contact phone	Email address	
Bar number		_

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Debtor 1

Minie Elizabeth Beavers

Case number (# known)_____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

• , •						
Are you aware that filing for bankruptcy is a serious act consequences? No Yes	tion with long-term financial and legal					
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprison No Yes	and that if your bankruptcy forms are ned?					
Yes. Name of PersonAttach Bankruptcy Petition Preparer's Notice, Dec. By signing here, I acknowledge that I understand the ris	Yes. Name of PersonAttach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	hat filing a bankruptcy case without an					
ainie Jawes x						
Signature of Debtor 1	Signature of Debtor 2					
Date 04 10 2016 MM / DD / YYYY	Date MM / DD / YYYY					
Contact phone (\$72) 444 - 4125	Contact phone					
Cell phone SAME	Cell phone					
Email address aimiebeavers agmail.com	Y]Email address					

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Fill in this information to identify your case:	
Debtor 1 Aimic Elizabeth Beavers First Name Middle Name Last Name	
Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of //	
Case number	Check if this is ar
(If known)	amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical In	formation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible finformation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets	or supplying correct ded schedules after you file
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	O
1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u> </u>
1b. Copy line 62, Total personal property, from Schedule A/B	···· \$
1c. Copy line 63, Total of all property on Schedule A/B	s
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	<u> </u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	s
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ <u>37,050</u>
Your total liabilitie	+ \$37,250 s \$37,250
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	A
Copy your combined monthly income from line 12 of Schedule I	*
i. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	•

Debtor 1

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Part 4: **Answer These Questions for Administrative and Statistical Records**

6	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other schedules.
	Yes	

- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 0

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	s
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$4,285.96
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
9g. Total. Add lines 9a through 9f.	\$4,285,96

Entered 04/19/16 16:57:09 Case 16-13338 Doc 1 Filed 04/19/16 Document Page 11 of 72 Fill in this information to identify your case and this filing: Debtor 1 Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: District of Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, tist the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home portion you own? entire property? ☐ Land Investment property Timeshare Describe the nature of your ownership City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Land ☐ Investment property Describe the nature of your ownership Timeshare City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only

County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

Check if this is community property

(see instructions)

Filed 04/19/16 Entered 04/19/16 16:57:09 Desc Main Debtor 1 Document Page 12 of Page number (if known)_ What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 1.3 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Land ☐ Investment property City State Describe the nature of your ownership ZIP Code ☐ Timeshare interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only ☐ Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles MO No Yes Who has an interest in the property? Check one. Make: 3.1. Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Make: 32 Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another

Official Form 106A/B

Other information:

instructions)

Check if this is community property (see

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Last Name Document Page 13 of 2 number (if known)

. 1			Do not deduct secured cl	
٨	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clai	ed claims on Schedule D
		Debtor 2 only	Crednors vvrio mave Ciai	ms Securea by Property
	Year:	Debtor 1 and Debtor 2 only	Current value of the	
F	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
(Other information:		r.	œ.
		☐ Check if this is community property (see instructions)	\$	\$
٨	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
٨	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
Υ	Year:	Debtor 2 only	Current value of the	
Д	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	Current value of t portion you own?
		At least one of the debtors and another		,
_	Other information:	Charle if this is seement if an array of the	\$	\$
11.000 and 1.001		Check if this is community property (see instructions)	Y	Ψ
pl o	les: Boats, trailers, motors, personal wa	d other recreational vehicles, other vehicles, and acces atercraft, fishing vessels, snowmobiles, motorcycle accesso		
o es M Y	les: Boats, trailers, motors, personal wa			claims on Schedule D
o es M M	les: Boats, trailers, motors, personal was Make: Model: Cear:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule E ns Secured by Property Current value of t
o es M M Y O M M Y O	les: Boats, trailers, motors, personal was Make: Model: Cear:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule Eas Secured by Property Current value of t portion you own? \$ ims or exemptions. Put I claims on Schedule D is Secured by Property

5.

Debtor•1

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Part 3:	Describe	Your	Personal	and Ho	usehold	Items

Do you own or have any legal or equitable inter	est in any of the following items?	Current value of the portion you own? Do not deduct secured claims
6. Household goods and furnishings		or exemptions.
Examples: Major appliances, furniture, linens, c	hina kitahagurara	
	·	
Yes. Describe		
i		\$
7. Electronics	опинантичности поможно и поможно из 24 при при на 1944 до 1950 година по	rigi superiorana ataum Desprision de
collections; electronic devices includ	, stereo, and digital equipment; computers, printers, scanners; mu ling cell phones, cameras, media players, games	sic
Yes. Describe		\$
		Accorded to the second to define any end of an individual production of the second to define a
3. Collectibles of value		
stamp, coin, or baseball card collecti	ints, or other artwork; books, pictures, or other art objects; ions; other collections, memorabilia, collectibles	
Yes. Describe		s O
		To the second se
9. Equipment for sports and hobbies		
and kayaks; carpentry tools; musical	other hobby equipment; bicycles, pool tables, golf clubs, skis; can l instruments	oes
Yes. Describe		\$ <u> </u>
10. Firearms Examples: Pistols, rifles, shotguns, ammunition,	and related equipment	un ya an international managamini gaman managa d
-		
Tyes. Describe		\$ (*)
		V-10-10-10-10-10-10-10-10-10-10-10-10-10-
11. Clothes		
Examples: Everyday clothes, furs, leather coats, No	, designer wear, shoes, accessories	
Yes. Describe		
and the state of t		\$
12. Jewelry		
gold, silver	engagement rings, wedding rings, heirloom jewelry, watches, gems	5,
No No		norse services and a service and a services and a service and a ser
Yes. Describe		\$
3. Non-farm animals		
Examples: Dogs, cats, birds, horses		
sh		
☐ Yes. Describe		\$
	did not already list, including any health aids you did not list	
V No		Page 1
Yes. Give specific		s ()
information		
	m Part 3, including any entries for pages you have attached	\$
ioi rait 3. write that number here		7 L

Debtor 1

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Part 4:	Describe	Your	Financial	Assets
---------	----------	------	-----------	--------

Do you own or have any	Current value of the portion you own? Do not deduct secured claims or exemptions.			
16. Cash <i>Examples:</i> Money you	have in your wallet, in your ho	ne, in a safe deposit box, and on hand when you file	your petition	
No Yes		с	ash:	s
and other s	savings, or other financial acco imilar institutions. If you have r	unts; certificates of deposit; shares in credit unions, to nultiple accounts with the same institution, list each.	orokerage houses,	
□ Yes		Institution name:		
	17.1. Checking account:			s ()
	17.2. Checking account:			\$ <i>(</i>)
	17.3. Savings account:			\$ <i>(</i>)
	17.4. Savings account:			\$ <i>(</i>)
	17.5. Certificates of deposit:			\$ ()
	17.6. Other financial account:			s ()
	17.7. Other financial account:			s 0
	17.8. Other financial account:			\$
	17.9. Other financial account:			s O
Examples: Bond funds,	or publicly traded stocks investment accounts with brok	erage firms, money market accounts		
№ No Yes	Institution or issuer name:			
				• 0
				\$ \$ (?)
				\$
				· ·
9. Non-publicly traded st an LLC, partnership, a		rated and unincorporated businesses, including	an interest in	
Mo No	Name of entity:	%	of ownership:	
Yes. Give specific information about			%	\$
them			%	\$ <u>O</u>
			<u></u> %	\$

Debtor *1

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		the state of the s
Negotiable instrumer	rporate bonds and other negotiable and non-negotiable instruments of include personal checks, cashiers' checks, promissory notes, and money orders. It is include personal checks, cashiers' checks, promissory notes, and money orders. It is include personal checks, cashiers' checks, promissory notes, and money orders.	
Mo No	and the same of th	
Yes. Give specific		
information about them		\$
		\$Q
		\$()
21. Retirement or pensi	on accounts	
4	n IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
₩ No Yes. List each		
	y Type of account: Institution name:	
	401(k) or similar plan:	\$ <u></u>
	Pension plan:	s
	IRA;	s ()
	Retirement account:	s O
	Keogh:	s ()
	Additional account:	s 0
	Additional account:	
	, today document	a
	sed deposits you have made so that you may continue service or use from a company ts with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
☐ Yes		
	. Institution name or individual:	
	. Institution name or individual: Electric:	s
		\$
	Electric:	\$
	Electric: Gas: Heating oil: Security deposit on rental unit:	\$
	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent:	\$
	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone:	\$
	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water:	\$
	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone:	\$
	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture:	\$
23. Annuities (A contract	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture:	\$
23. Annuities (A contract	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: for a periodic payment of money to you, either for life or for a number of years)	\$
23. Annuities (A contract	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: for a periodic payment of money to you, either for life or for a number of years)	\$
23. Annuities (A contract	Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: for a periodic payment of money to you, either for life or for a number of years)	\$

Case 16-13338 Doc 1 Find the Company of the Company	iled 04/19/16 Entered 04/19/16 16:57:09 E	
4. Interests in an education IRA, in an account in a qu	ialified ABLE program, or under a qualified state tuition progran	
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).		
No No		
Yes Institution name and de	escription. Separately file the records of any interests.11 U.S.C. § 52	1(c):
		<u> </u>
		- \$ <u> </u>
		- \$
Trusts, equitable or future interests in property (oth exercisable for your benefit	ner than anything listed in line 1), and rights or powers	
M No		
Yes. Give specific		
information about them		\$
Layer to Sent a recommendate of the sent and		
Patents, copyrights, trademarks, trade secrets, and		
Examples: Internet domain names, websites, proceeds No	Trom royalities and licensing agreements	
grant and discharged A throughout A through A		
Yes. Give specific information about them		s
Licenses, franchises, and other general intangibles	i e	
Examples: Building permits, exclusive licenses, cooper	ative association holdings, liquor licenses, professional licenses	
₫ No		
☐ Yes. Give specific		A
information about them		\$
oney or property owed to you?		Current value of the portion you own?
		Do not deduct secured
Chapting the helps in the history with the second to be the second of the second to be		claims or exemptions.
Tax refunds owed to you		
No No		6
Yes. Give specific information about them, including whether	Federal:	\$ <u>\</u>
you already filed the returns	State:	\$ 0
and the tax years	Local:	s ()
hand all and stay to provide the stay of t		
Family support		
	port, child support, maintenance, divorce settlement, property settler	nent
No No	•	
☐ Yes. Give specific information		
•	Alimony:	\$ <u>U</u>
	Maintenance:	\$
THE STATE OF THE S	Support:	\$ <u></u>
	Divorce settlement:	\$ <i>Q</i>
	Property settlement:	\$ <u> </u>
Other amounts someone owes you	THE NEW PROPERTY OF THE STATE AND A SEA AND A	
Examples: Unpaid wages, disability insurance payment	s, disability benefits, sick pay, vacation pay, workers' compensation	1
Social Security benefits; unpaid loans you m	iade to someone else	
gath distance and a supplement of the supplement		
Yes. Give specific information		s ()

Debtor 1	Case 16-13338 D	oc 1 Filed 04/19/16 Last Name	Entered 04/19/16 16:57:09 □ C Page 18 Ofa 2 umber (# known)	
			and the second s	
	s in insurance policies es: Health, disability, or life insurar	nce; health savings account (HSA)	; credit, homeowner's, or renter's insurance	
	Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	• •	,	•
				\$
				\$
If you are	erest in property that is due you e the beneficiary of a living trust, e because someone has died.		nce policy, or are currently entitled to receive	
	Give specific information	THE CONTROL TO THE CONTROL TO THE CONTROL TO THE CONTROL TO THE CONTROL THE CO		
				\$
Example	against third parties, whether or ss: Accidents, employment dispute		- ·	
10 No □ Yes	Describe each claim			
00.	DODONDO GAGA GIAMI			s
34. Other co to set of No		s of every nature, including co	unterclaims of the debtor and rights	
Yes.	Describe each claim	\$\ AV \\\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"		
No No	ncial assets you did not already Give specific information	list		s O
36. Add the	dollar value of all of your entrie	s from Part 4, including any ent	ries for pages you have attached	
	4. Write that number here		_	<u>\$</u>
	and the second s			
Part 5:	Describe Any Business-I	Related Property You Ow	n or Have an Interest In. List any	real estate in Part 1.
,	own or have any legal or equitab	le interest in any business-rela	ted property?	
	Go to Part 6. Go to line 38.			
e res.	GO to line 36.			Current value of the
				portion you own? Do not deduct secured claims or exemptions.
No No	s receivable or commissions yo	u already earned		or on
☐ Yes.	Describe			s
	quipment, furnishings, and supp		nes, rugs, telephones, desks, chairs, electronic device	s = 1
V No				
Yes.	Describe			\$

40. Mach	inery, fixtures, e	quipment, supplies you us	se in business, and tools of your trac	de	
M N		errett littet Vicerbälls antidects riidlikke teillikke teilik antiek hekes Hanksen Hanksen des kolonis ein hekes ein bestellige	mik dissa saka sa saka ka saka saka saka saka	Mijahannahindusahundusahundusahundusahundusahundusahundusahundusahundusahundusahundusahundusahundusahundusahun	~~~
☐ Y	es. Describe				\$
	<u>;</u>				orana.
41. inven					
	o es. Describe	THE PROPERTY OF THE PART OF A SHEWAY WITHOUT PART OF THE PART OF A SHEW AND AS A THE PART OF A SHEW AND A SHEW	NY MIKAMBANANANANANY PERINTANAN'I KANTANINAN'I KANTANINAN'I ARIANIN'I ARIAN'I PERINTANINAN'I KANTANININ'I ARIAN'I	THE STATE OF THE S	s O
	Par	ና ነለ ነውም የተግለፉ የምህነሳስ ለማየ ት የ ላለኝ መንስራቸው የቀናዩ ለማየራም ለጥለት ለ የ የምህና ያለም አመር ነብ የ ነው ነገር እና ለመመር ነብ የ ነው ነገር እና ለተነ መመር	the wat de west accepted the table of more such that the water strains and the second of a compact of the second	t of white 1 of the Park Mark Land Standard of the School of the School of School of the School of the School of Sch	
42. Intere	sts in partnersh	ips or joint ventures			
S N	-				
☐ Ye	es. Describe	Name of entity:		% of ownership:	•
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	%	\$
				<u></u> %	\$
				%	\$
		g lists, or other compilation	ons		
M No					:
Ų Y€	es. Do your lists	include personally identifi	able information (as defined in 11 U.S	5.C. § 101(41A))?	
	Yes. Desc	ribe	ANT-4-BANT 1.0. = "N-TO-1001 / M-000-ANT-10-10-10-10-10-10-10-10-10-10-10-10-10-	90°440°112 F 40°1996 AND THE PROPERTY AND THE PROPERTY AND THE PROPERTY AND	
					\$
44 Anv h	usiness-related	property you did not alrea	traturus para atra anno anterior anterior anno anterior anno anterior anno anno anterior anno anno anterior an Av list	Parks Advarlate Advarlate And Andrews (Advantage Annotation Symmetrium and annotation (party 25 or Advardate) and	American
⊠ No		property you did not direct	oy not		
	es. Give specific				\$
1041	omation				s
					\$ 0
					s ()
					\$ ()
					s Ö
45 Add t	he dollar value o	of all of your entries from P	art 5, including any entries for page	se vou have attached	
			arro, moldaning any entires for page	_	\\$
	÷	No management	and the second of the second o	Land Control of the C	**************************************
					\$
Part 6:	Describe Ar	ny Farm- and Commerc have an interest in farmla	ial Fishing-Related Property You nd, list it in Part 1.	u Own or Have an Interest i	n.
		ny legal or equitable intere	est in any farm- or commercial fishin	g-related property?	
	o. Go to Part 7. es. Go to line 47.				
	.o. 00 to iii to 41 .				Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
47. Farm		author famo anima d Cala			•
Exam _i	•	oultry, farm-raised fish			
) :s	and where the first the following the description of the first term from the first term that the description of	танда меменда да баш беренде делем да среш гуреда да свет да Места интей да тей из сейне гу Места интейства объ	жара ода одат размен размен жара од од од од од од от от размен од от од од от од од от од од од од од од од о Станов од	
	WURREN AND AN				\$
	v Doda	1 AVA 11-1-1 A1-1-1-1-A A1-1-1-1-1-1-1-1-1-1	VICENSIA AND SENSO CONTROL CON		Ψ

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Debtor 1 First Name Middle Name Last Name Page 20 of a feet umber (if known)

48. Crops—either growing or harvested	
□ No	und-m _e
Yes. Give specific information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No	na.k
☐ Yes	\$
50. Farm and fishing supplies, chemicals, and feed	
□ No □ Yes	:
	\$
51. Any farm- and commercial fishing-related property you did not already list	
□ No	·····
Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached	T _e
for Part 6. Write that number here	1
Part 7A Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?	
Examples: Season tickets, country club membership No	
☐ Yes. Give specific	\$
Information	\$ \$
	Ψ
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2→	s O
56. Part 2: Total vehicles, line 5	
57. Part 3: Total personal and household items, line 15	
58. Part 4: Total financial assets, line 36 \$	
59. Part 5: Total business-related property, line 45	*
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54 +\$	
62. Total personal property . Add lines 56 through 61	+\$
63. Total of all property on Schedule A/B. Add line 55 + line 62.	\$

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Fill in this information to ide		ocument Page	21 of 72
Debtor 1 Aimie	Elizabeth Middle Name	Beavers Last Name	_
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for	r the:	District of (State)	☐ Check if this is a
Case number (If known)			amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exe
--

1.	Which set of exemptions are you claiming?	Check one only, even if	your spouse is filing with you.	
	☐ You are claiming state and federal nonbant☐ You are claiming federal exemptions. 11 U		U.S.C. § 522(b)(3)	
2.	For any property you list on Schedule A/B the	hat you claim as exem _l	ot, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property		Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description:	\$	□ \$	
	Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
	Brief description:	\$	***************************************	
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
	Brief description:	\$		
	Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption o (Subject to adjustment on 4/01/16 and every 3)
	☐ No☐ Yes. Did you acquire the property covered	by the exemption within	1,215 days before you filed this case?	
	☐ No ☐ Yes			
	1es			

Debtor 1

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At Middle Name Bocument Page 22 of a 4 Jumber (if known)

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	G \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	- \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

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	Document Page 23 of 72			
Fill in this information to identify your ca	Se:			
Debtor 1 Aimie Elizabe	th Reavers			
First Name Middle	Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
(Spouse, it ming) rast value minorie				
United States Bankruptcy Court for the:	District of(State)			
Case number	. ,		Chock	if this is an
(If known)				ed filing
			·	J
Official Form 106D				
Market Control of the			_	
Schedule D: Creditor	s Who Have Claims Secur	ed by Pro	perty	12/15
Re as complete and accurate as possible	. If two married people are filing together, both are e	gually responsible f	or supplying correc	t
information. If more space is needed, cor	by the Additional Page, fill it out, number the entries,	and attach it to this	form. On the top of	any
additional pages, write your name and ca	se number (if known).		•	-
1. Do any creditors have claims secured !	by your property?			
No. Check this box and submit this for	m to the court with your other schedules. You have noth	ing else to report on	this form.	
Yes. Fill in all of the information below	•	,		
Tes. I in a an of the thornagon below	•			
Part II List All Secured Claims				
		Column A	Column B	Column C
2. List all secured claims. If a creditor has	nore than one secured claim, list the creditor separately	Amount of claim	Value of collateral	Unsecured
for each claim. If more than one creditor	nas a particular claim, list the other creditors in Part 2.	Do not deduct the	that supports this	portion
As much as possible, list the claims in alp	habetical order according to the creditor's name.	value of collateral.	claim	If any
2.1	Describe the property that secures the claim:	¢	\$	\$
Creditor's Name	Describe the property that secures the claim:	~	Ψ	Ψ
Creditor's Name				
Number Street	-			
	As of the date you file, the claim is: Check all that apply			
	Contingent			
	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number	man ar ann an	essamment anna sana anna membra series à della distribution della series della series della series della series	AZDIEGOS POGRAS CIRRIPANDO GERMANIO POR PORTO DE PORTO D
2.2]	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name			•	
Number Street		annound the same of the same o		
	As of the date you file, the claim is: Check all that apply	•		
	Contingent			
Ob. 210 0-1-	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
At least one of the debters and another				

Last 4 digits of account number

Other (including a right to offset) _

Add the dollar value of your entries in Column A on this page. Write that number here:

Date debt was incurred

☐ Check if this claim relates to a community debt

Debtor 1

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Aimie Elizabeth Beavers Model Name Last Nama

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Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street		TO 1		
	- As of the date you file, the claim is: Check all that apply.	3		
	☐ Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Judgment lien from a lawsuit			
At least one of the deptors and another	Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number	such semantusus and a service	egilagusen seksissä osikannik tähinnikkillä tähinnikkillä tää 2000 keksillä (1900 killeksillä 1900 killeksillä	ivazopin viralna valikala suolininkilä lääkikki
The second secon	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
V	Contingent			
2000	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt	,	•		
Date debt was incurred	Last 4 digits of account number		A THE STATE OF THE	
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	_			
	As of the date you file, the claim is: Check all that apply.	,		
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	m		
Date debt was incurred	Last 4 digits of account number			
	es in Column A on this page. Write that number here:			
그는 사실을 것을 것 같 할 것 같다는 것 때문 작용하는 데 무역하는 이 이 이 하는 것 때문에 가려가 되어 되어 되어 하지 않는 이 이 하는 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이	and the annual contract of the	\$		
If this is the last page of your form	n, add the dollar value totals from all pages.	\$		

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Debtor 1

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List Others to Be Notified for a Debt That You Already Listed Part 2:

ag	ency is tryi u have moi	ng to collect from your than one creditor	ou for a debt you owe to	someone else, list th you listed in Part 1, l	a debt that you already listed in Part 1. For example, if a collection ne creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
	,	in the second of			On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
		and the second s			<u></u>
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	City		State	ZIP Code	
	Oily .				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
					_
	City		State	ZIP Code	_
	The state of the s	ng paganggan kan samaan asama ni ana anan si anta anan si anta di anta anta di anta anta di anta anta di anta a	ya, yangan ya santan kantan ya pagangangan pagangan ya kanan kalaman dan dan dan dan dan dan dan dan dan d	ngangan kananggan kananggan kanan samun samun samunggan kanggan kanggan kanggan kanggan samunggan kanggan samu	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
					_
	City		State	ZIP Code	
	gazen Agungan yen obesak Asabeke (6-68	ajaki, kepalangan kepandan dan menengan pi tamban pengangan pengangan pengangan pengangan pengangan beriah ber	LLLCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC	econd tearing tour meter and it is not make a subject by highligh by highligh has been deadless.	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	. 13111001	कर ए जैरे			
		- LAMASTON CONT.			
	City	ng , ya sayunny uru gasa ye mara uru masa sa dadhiri Adhabiida badankari ka tro b	State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		autom,		
	City		State	ZIP Code	-

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Fill in this information to identify the case:	Document Page 26 of 72	
Debtor AIMIE E BEAVERS		
United States Bankruptcy Court for the:	District of \	
Case number(If known)	(State)	
(, , , , , , , , , , , , , , , , , , ,		D
Official Form 206E/F		Check if this is an amended filing
	5A## H#	Ţ
Be as complete and accurate as possible Use D	Who Have Unsecured Claims art 1 for creditors with PRIORITY unsecured claims and Part 2 for	12/15
on Schedule A/B: Assets - Real and Personal De	operty (Official Form 206A/B) and on Schedule G: Executory Con 1 1 and 2 in the boxes on the left. If more space is needed for Part form.	 Also list executory contracts
Do any creditors have priority unsecured claim	ns? (See 11 U.S.C. § 507).	
No. Go to Part 2. Yes. Go to line 2.		
and a summary of the	Nuncouved slate of the state of	and the second of the second o
3 creditors with priority unsecured claims, fill out a	e unsecured claims that are entitled to priority in whole or in part and attach the Additional Page of Part 1.	. If the debtor has more than
Priority creditor's name and mailing address	Total claim	Priority amount
	As of the petition filing date, the claim is: \$	<u> </u>
	Unliquidated Disputed	
Date or dates debt was incurred	Basis for the claim:	
Last 4 digits of account number	Is the claim subject to offset?	7.7
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	☐ No ☐ Yes	
Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$	\$
	Contingent Unliquidated	
Date or dates debt was incurred	☐ Disputed	
Date of dates debt was incurred	Basis for the claim:	
Last 4 digits of account number	Is the claim subject to offset? ☐ No	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	Yes	
Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$	\$
	Contingent	- •
	Unliquidated Disputed	
Date or dates debt was incurred	Basis for the claim:	
Last 4 digits of account number	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured	□ No □ Yes	AND COMMENT
claim: 11 U.S.C. § 507(a) ()		

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Debtor		

evious page. If no additional PRIORITY creditors	exist, do not fill out or submit this page	Total claim	Priority amount
Priority creditor's name and mailing address			
	As of the petition filing date, the claim is Check all that apply. Contingent Unliquidated Disputed	:	\$
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	☐ Yes		
Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent	\$	\$
	Unliquidated Disputed		
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account number	Is the claim subject to offset? No Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	⊒ res		
Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$	\$
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	u res		
Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$	\$
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account	Is the claim subject to offset? ☐ No		

Debtor

Part 2:	List All	Creditors	with N	ONPRIORITY	/ Unsecured	Claims
		aleastol 2	AASTIS IS	CHEMIORIT	unsecured	Claims

 List in alphabetical order all of the creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 	unsecured claims. If the debtor has more the 2.	an 6 creditors with nonpriority
		Amount of claim
3.1 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
GRANT + WEBER	Check all that apply. Contingent	\$
8880 WISUNSET RD #275	Unliquidated Disputed	
LAS VECAS, NV 89148	Basis for the claim: WEDICAL	
Date or dates debt was incurred	Is the claim subject to offset?	 .
Last 4 digits of account number 9431	No Yes	
3.2 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	The second secon
IC SYSTEMS	Check all that apply. Contingent	s 477.00
444 HIGHWAY 96E	Unliquidated Disputed	
ST. PAUL, MN 592-72557	·	
_	Basis for the claim: RCN CABLE	_
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number 8 1 7 1	☐ Yes	
3.3 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	, 998.00
MEDICAL BUSINESS BUREALL	- 🖸 Contingent	<u> </u>
1460 RENAISSANCE DRIVE STE 400	Unliquidated Disputed	
PARK RIDGE, IL 60068	Basis for the claim: WEDICAL	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number $0533 \times$	₩ No Yes	
.4 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	176, 66
MIDLAND CREDIT MANAGEMENT	Check all that apply. Contingent	<u>s 679.55</u>
P.O. BOX 939069	Unliquidated Disputed	
SAN DIEGO, CA 92193		
211 21 12	Basis for the claim: <u>MEDICAC</u>	_
Date or dates debt was incurred C4-01-15	Is the claim subject to offset? No	
Last 4 digits of account number	☐ Yes	
PINNACLE CREDIT SERVICES	As of the petition filing date, the claim is: Check all that apply.	<u> </u>
P.O. Box 640	Contingent Unliquidated	
HOPKINS, MN S5343	☐ Disputed	
	Basis for the claim: VERIZON WIRE	LESS
Date or dates debt was incurred 3-26-16	Is the claim subject to offset?	
Last 4 digits of account number $\mathcal{V} \mathcal{I} \mathcal{I}$	Yes	
6 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	: 4.289.65
U.S. DEPARTMENT OF EDUCATION DEFAULT RESOLUTION GROUP	Contingent	
P.G. BOX 69184 HARRISBURG, PA 17106-9184	Unliquidated Disputed	
HARRISBURG, PA 17106-4184	Basis for the claim: STUDENT LOAK	J
Date or dates debt was incurred 2012	Is the claim subject to offset?	
Last 4 digits of account number 3774	No No Yes	
The state of the s	**************************************	

Debtor

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Part 24 Additional Page		
Copy this page only if more space is needed. Continue number previous page. If no additional NONPRIORITY creditors exist,	ering the lines sequentially from the do not fill out or submit this page.	Amount of claim
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	is epocts
VIRTUOSO SOURCING GROUP	Check all that apply. Contingent	\$
	Unliquidated	
4500 E. CHERRY CREEK SOUTH DP	Disputed Liquidated and neither contingent por	
DENVER, CO 80246	disputed	
	Basis for the claim:	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number 3655	☑ No □ Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated	\$
	_ Disputed	
_	Basis for the claim:	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
	Basis for the claim:	Para la constanta de la consta
Date or dates debt was incurred	Is the claim subject to offset?	The state of the s
Last 4 digits of account number	No Yes	I I
	Tes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
	Basis for the claim;	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	□ No □ Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$
	Contingent Unliquidated Disputed	
	Basis for the claim:	
Date or dates debt was incurred	Is the claim subject to offset?	
	□ No	

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Debtor

Name

Part 3:

List Others to	Be	Notified	About	Unsecured	Claims

if r	o others need to be notified for the debts listed in Parts 1 and 2, do not fill out or su	br	nit this page. If additional pages are ne	eded, copy the next pa
	Name and mailing address Or	lat	rhich line in Part 1 or Part 2 is the ed creditor (if any) listed?	Last 4 digits of account number, if any
	Lin	e		
			Not listed. Explain	
•	Lin	e		
-			Not listed. Explain	
	Lin	e		
-			Not listed. Explain	
-			Not listed. Explain	
	The state of the s	е ,		geragus que agresago e commente e se é, que que é é destande a é é cade d'activade a administra ha meir
-		_	Not listed. Explain	
-		Β.		
		-	Not listed. Explain	
_		_	and a production of the second	
-			Not listed. Explain	
_	Line			
		1	Not listed. Explain	
	Line	-		Profession Francisco (Francisco) and a francisco (Francisco) and a general programme are sense and a propagati
		1	Not listed. Explain	
		1	lot listed. Explain	
_			ud-Ambatham	· · · · · · · · · · · · · · · · · · ·
_			lot listed. Explain	
ten	Line	_		and the same and a consistence of the annual property of the same and an annual problem.
			lot listed. Explain	

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Debtor

Parit 3a

Additional	Page f	or Others	to Be I	Notified /	About I	Unsecured (Claims

Line Line Not listed. Explain September Not listed. Explain Line Line Line Line Line Line Line Line Not listed. Explain Line Not listed. Explain Line Line Not listed. Explain Not listed. Explain Line Not listed. Explain Not listed. Explain Not listed. Explain Line Not listed. Explain Line Not listed. Explain Not listed. Explain Line Not listed. Explain Not listed. Expl		Name and mailing address		On rela	which line in Part 1 or Part 2 is the ated creditor (if any) listed?	Last 4 digits of account number, if any
Not listed. Explain	1			Line		
Line Line Line Line Line Line Line Line			M. (da.,),			
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Not listed. Explain	_				Not listed. Explain	
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Line						
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						A-A-A

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

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Debtor 1

Document

Aimie Stizabeth Beaters

First Name Middle Name Last Name

Case number (If known)

Will the lease be assumed?
Sent 1889 in the regular properties and the properties of the research of the sent of the
□ No
Yes
□ No
Yes
□ No
Yes
And contains the customs of the independent containing and an independent
Yes
No
Yes
No
Yes
Americans of the constraints and the first according to the constraints and the constraints are constraints and the constraints are constraints and the co
Yes

Date MM / DD / YYYY

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Fill in this information to identify the case:	Document Page 34 of 72	
Debtor AIMIE E IS	SAVERS	
United States Bankruptcy Court for the:		
Case number	(State)	
(If known)	NAME AND PROPERTY AND ADDRESS.	
		Check if this is a
Official Form 206E/F		amended filing
Schedule E/F: Creditors	Who Have Unsecured Claims	12/15
on Schedule A/B: Assets - Real and Personal Pro (Official Form 206G). Number the entries in Parts the Additional Page of that Part included in this f		n. Also list executory contracts
Total Civilions With PRIORITY C		
 Do any creditors have priority unsecured claim No. Go to Part 2. 	s? (See 11 U.S.C. § 507).	
Yes. Go to line 2.		
	Unpopured alalma that are multi-	and the second second second second sections in the second second section section sections (section section sec
3 creditors with priority unsecured claims, fill out at	unsecured claims that are entitled to priority in whole or in par nd attach the Additional Page of Part 1.	t. If the debtor has more than
Driovity and discussion of the state of the	Ang sana na	Priority amount
Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$	
	Contingent Unliquidated	
Date and date of the same	Disputed	
Date or dates debt was incurred	Basis for the claim:	
Last 4 digits of account	Is the claim subject to offset?	
number	□ No □ Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	— 165	
Dringitu orgalitada agua a da agua		
Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$	\$
	Contingent Unliquidated	
Date or dates debt.	☐ Disputed	
Date or dates debt was incurred	Basis for the claim:	
Last 4 digits of account	Is the claim subject to offset?	
number	No Standard to onset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	u tes	
Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$	\$
	Contingent Unliquidated	
Potential	☐ Disputed	
Date or dates debt was incurred	Basis for the claim:	
Last 4 digits of account	is the claim subject to all to	
number	is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	☐ Yes	

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Part 1. Additional	Document Page 35 of 72
Page	Case number (If known)
Copy this page if more space is need	led. Continue numbering the lines sequentially from the
1. 35. II II additional PRIOF	RITY creditors exist, do not su
2. Priority creditor's	led. Continue numbering the lines sequentially from the RITY creditors exist, do not fill out or submit this page. Total claim
2 Priority creditor's name and mailing	l address Chofity amount
	As of the petition filing date, the claim is:
	Contingent
	Unliquidated Disputed
Date or dates debt was incurred	
	Basis for the claim:
Last 4 digits of account number	
Specie	Is the claim subject to offset? ☐ No
Specify Code subsection of PRIORITY claim: 11 U.S.C. § 507(a)	Unsecured Yes
2 Priority creditor's name and mailing add	Iress
	As of the
	As of the petition filing date, the claim is: Check all that apply. Contingent
	Contingent
	Disputed
Date or dates debt was incurred	Roote
act A diag	Basis for the claim:
Last 4 digits of account number	le the
Specify Code subsection of PRIORITY unse	Is the claim subject to offset? No
Priority creditor's name and mailing address	
address	The state of the s
	As of the petition filing date, the claim is:
	Contingent
Deat	Disputed
Date or dates debt was incurred	
	Basis for the claim:
Last 4 digits of account number	le the _ l .
Specify Code subsection of PRIORITY unsecure claim: 11 U.S.C. § 507(a) (Is the claim subject to offset? ☐ No
claim: 11 U.S.C. § 507(a) ()	ed Yes
Priority creditor's name and mailing address	
and mailing address	As of the petition filing date that the control of the petition filing date the control of the petition fi
	oneck all that apply the Claim is
	Contingent Unliquidated
	Disputed
ite or dates debt was incurred	Basis for the at .
it 4 digite of	Basis for the claim:
t 4 digits of account ober	Is the claim
cify Code subsection of PRIORITY unsecured	is the claim subject to offset?
m: 11 U.S.C. § 507(a) ()	☐ Yes
The second secon	To the state of th
Form 206E/F	Windowski, and the state of the
Schedul	e E/F: Cradit

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Debtor

ANMIS	30	RS Dacument
Name		- SELIVEICS

Part 21 List All Creditors with NONPRIORITY Unsecured Claims			
3.	ist in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority nsecured claims, fill out and attach the Additional Page of Part 2.		
			Amount of claim
3.1	Nonpriority creditor's name and mailing address AMERICAN COUNCIL ONEXERCIST 4851 PARAMOUNT DR.	Unliquidated	<u>s_1,000.00</u>
	SAN DIEGO, CA 92123	_ Disputed	
		Basis for the claim: TRAININE	<u> </u>
	Date or dates debt was incurred	Is the claim subject to offset? ☑ No	
	Last 4 digits of account number	Yes	
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	2 000 00
	THE ART INSTITUTES	Check all that apply. Contingent	s 3,000,00
	1400 PENN AVE.	Unliquidated Disputed	
	PITSBURGH, PA 15222	•	
		Basis for the claim: ENUCIAT (ON) market
	Date or dates debt was incurred	is the claim subject to offset? ☑ No	
	Last 4 digits of account number	Yes	
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	1 600 00
	BANK OF AMERICA	Check all that apply. ☑ Contingent	\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	100 N TRYON ST.	Unliquidated Disputed	
	CHAROLETTE, NC 28255	Basis for the claim: BANK CHEC	17. 5.
	Date or dates debt was incurred	Is the claim subject to offset?	KILLE
	Last 4 digits of account number	☑ No	
		Yes	
3.4	Nonpriority creditor's name and mailing address \mathcal{TPM}	As of the petition filing date, the claim is: Check all that apply.	s 750.50
		Contingent	***************************************
	270 PARK AVE.	Unliquidated Disputed	
	NEW YORK CITY, NY 10017	Basis for the claim: CHECKING	ACCOI) NT
	Date or dates debt was incurred	is the claim subject to offset?	J (0 0 0
	Last 4 digits of account number	No No	
—	Nonpriority creditor's name and mailing address		
	WELLS FARGO	As of the petition filing date, the claim is: Check all that apply.	<u>\$ 1,000.00</u>
	420 MONTGOMERY	Contingent Unliquidated	
_	SAN FRANSISCO, CA 94104	☐ Disputed	
	,	Basis for the claim: CHECK ACCO	UNT
	Date or dates debt was incurred	Is the claim subject to offset? ☑ No	
	ast 4 digits of account number	Yes	
	Ionpriority creditor's name and mailing address	As of the petition filing date, the claim is:	, 14 cm, ca
	GOLDMAN + GRANT	Check all that apply. Contingent	
-	134 N LASAUE ST	Unliquidated Disputed	
	CHICAGO, 12 60602	Basis for the claim: VIHICLS	
Ē	ate or dates debt was incurred	Is the claim subject to offset?	
L	ast 4 digits of account number	☑ No ☑ Yes	
	and the second second plant and the second s		

Parit 28

Additional Page

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ALIMIS S	BS A Document	Page 37 of 72
Name	BEHVEICE	Case number (if known)

pr	ppy this page only if more space is needed. Continue numbe evious page. If no additional NONPRIORITY creditors exist,	ring the lines sequentially from the do not fill out or submit this page.	Amount of claim
3	Nonpriority creditor's name and mailing address FIFTH THIRD BANK 38 FOUNTAIN SQURE PU CINCINATTI, OH & 4562	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Liquidated and neither contingent nor disputed	<u>\$ 9,600.00</u>
	,	Basis for the claim: BANK	
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? No Yes	
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? No Yes	
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	****
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? No Yes	
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
-		Basis for the claim:	
	Date or dates debt was incurred	Is the claim subject to offset? No Yes	_
] \	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Uhliquidated Disputed	\$
_			
	rate or dates debt was incurred	Basis for the claim: Is the claim subject to offset? No	•

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Case number (if known)_ Document

Debtor

Name

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10	-	ъ.	78	-	8	

List Others to Be Notified About Unsecured Claims

lame and mailing address	On	w	nich line in Part 1 or Part 2 is the d creditor (If any) listed?	Last 4 digits of account number, if any
	Line	e	MANAGEMENT AND ASSESSMENT AND ASSESSMENT ASS	
			lot listed. Explain	
		е _	Andrew Are	
		N 	lot listed. Explain	
		N	ot listed. Explain	
	Line			
		N _	ot listed. Explain	
			emperance.	•
		N	ot listed. Explain	
	Line			
	L	N	ot listed. Explain	*
	Line			
		N	ot listed. Explain	
		No	ot listed. Explain	
	Line			
		No	ot listed. Explain	
	Line			,
			ot listed. Explain	
	Line			
		No	ot listed. Explain	
	Line	_		
		No	t listed. Explain	

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Debtor

Document	rage 39 01 72
Name	Case number (if known)

Na	me and mailing address		O ₁	n v ela	rhich line in Part 1 or Part 2 is the led creditor (if any) listed?	Last 4 digits of account number, if any
_			Lin	ne		
					Not listed. Explain	
Construction			.,			en en souverige and en
)	Not listed. Explain	- TRANSPORTER PRESIDENCE AND ADMINISTRATION -
				1	Not listed. Explain	
************	and the state of t				Not listed. Explain	
		***************************************			Abot State of Street	
0		MANAGER CONTRACTOR OF THE STATE			Not listed. Explain	
·	APAPAN AIL A LA	TO TO PLAN AND PARTY AND A STATE OF THE STAT			Not listed. Explain	

					Not listed. Explain	
						
					Not listed. Explain	- William William
Proceeding Assessment	the state of the s		Line	e		
					Not listed. Explain	
	A CONTRACTOR OF THE STATE OF TH		Line	е_		
					Not listed. Explain	
			· · · · · · · · · · · · · · · · · · ·			
				1	Not listed. Explain	
				1	Not listed. Explain	
		· · · · · · · · · · · · · · · · · · ·	Line		let listed. Eveloin	
		N///		-	lot listed. Explain	
			Line	,		

Debtor	Case 16-13338	Doc 1	Filed 04/19/16 Document	Entered 04/19/16 Page 40 of 72 Case number (i	6 16:5	57:09 Desc Main
	Name Total Amounts of the I	Priority and				
5. Add the	amounts of priority and no	onpriority un	secured claims.			
						Total of claim amounts
5a. Total cla	ims from Part 1			5a		\$
5b. Total cla	ims from Part 2			5b	. +	\$
5c. Total of I	Parts 1 and 2 + 5b = 5c.			5c		\$

Case 16-13338 Doc 1 Filed 04/19/16 Entered 04/19/16 16:57:09 Desc Main Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: ____ District of ☐ Check if this is an amended filing (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other, Specify_ ☐ No ☐ Yes Last 4 digits of account number _ ___ \$ \$ \$ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated City ZIP Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify ☐ No ☐ Yes

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r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprio amount
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Charles	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
Check if this claim is for a community debt	Other. Specify			
s the claim subject to offset?				
□ No				
Yes				
+4 ($+6$) $+6$) $+6$) $+6$) $+6$) $+6$ 0	は10日の日本出版は19 exではては一大の大きな特別を持ちらから行うが国際的な信仰をからでは2000年では、そのでは、そのでは、そのでは2000年では2000年では2000年では2000年では2000年では2000年では		00000000000000000000000000000000000000	cinang namata a an-a-animaw
Disable Conditions Name	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	William and the daha improved			
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent Unliquidated			
City State ZIP Code	Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
-	Other. Specify			
s the claim subject to offset?				
□ No				
Yes THE STATE OF		micromodularistika sindistaristika silika silika silika kalenda silika silika silika silika silika silika silik	Employees on a Source of the Control of Cont	poguiça be essiventen tien in telemente
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
Minute Steet	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	→ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 			
At least one of the debtors and another	Claims for death or personal injury white you were			
☐ Check if this claim is for a community debt	intoxicated	0.000	889529596-4-44-22-45-45-45-45-45-45-55-55-55-55-55-55-55-	
CHECK II this Claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
□ No				
☐ Yes				

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List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you' No. You have nothing to report in this part. Submit this form to the Yes	
	nonpriority unsecured claim, list the creditor separately for each claim,	rder of the creditor who holds each claim. If a creditor has more than one For each claim listed, identify what type of claim it is. Do not list claims already at the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
.1	FITH THIRD GANK Nonpriority Creditor's Name	Last 4 digits of account number
		When was the debt incurred?
	SOSO KINGSLEV DENE Number Street	
	CINCINNIATI OH 45227 City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	Who incurred the debt? Check one.	Contingent
	Debtor 1 only	Unliquidated Disputed
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	At least one of the debtors and another	Student loans
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts
	M No	Other. Specify AUTO LOAN
	Yes	
.2	MORCHANTS CREDIT GOINE C Nonpriority Creditor's Name	Last 4 digits of account number 1281 \$ 107.00 When was the debt incurred? 19-18-12
	223 W. JACKSON BLVD. STE 410	
	CHICAGO IL 60606	As of the date you file, the claim is: Check all that apply.
		Contingent
	Who incurred the debt? Check one. Debtor 1 only	Unliquidated Disputed
	Debtor 2 only	·
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce
	☐ Check if this claim is for a community debt	that you did not report as priority claims
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify MS DICA/
	Yes	
3	MS PCHANTS CPS DIT BUIDE C. Nonpriority Creditor's Name	Last 4 digits of account number $\frac{1}{1282}$ \$ 202.00 When was the debt incurred? $\frac{1}{1282}$
	723 W. JACKSON BLVD: 5TE 410	when was the debt incurred?
	CHICAGO IL 60606 City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	Who incurred the debt? Check one.	☑ Contingent
	Debtor 1 only	Unliquidated
	Debtor 2 only	☐ Disputed
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
	_	Student loans
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts
	☐ Yes	Other. Specify MEDICAL

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Your NONPRIORITY Unsecured Claims — Continuation Page

Aft	er listing any entries on this page, number them beginning with 4	.4, followed by 4.5, and so forth.	Total claim
	NATION WIDE CREDIT + COLL Nonpriority Creditor's Name	Last 4 digits of account number 7065	\$468.00
	SIS COMMERCE DRIVE STE 270	When was the debt incurred? 03-26-19	
	Númber Street ORKBROSK IL 60523	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one. Debtor 1 only	☐ Unliquidated ☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	:
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	☑ Other Specify MEDICAL	Addition to the
	☑ No ☐ Yes		to a time and a
1	→ Yes → **	FILE# 1481914 (1+4)	g g g g g g g g g g g g g g g g g g g
	NATIONWIDE CREDIT + COUL Nonpriority Creditor's Name	Last 4 digits of account number 7067	\$ 130,00
	• •	When was the debt incurred? 03-28-15	- Shirth
	SIS COMMERCE DR. STE 270		
	OAKBROOK IL 60523	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☑ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	1
	☐ Check if this claim is for a community debt	you did not report as priority claims	**************************************
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify MS.DICP.L.	Manager 1 () and
	☑ No	other, Specify MEDICAL	10
	ping.	FILE# 1481914 (3)	
		PILC II	
	NORTHWEST COLLECTORS Nonpriority Creditor's Name	Last 4 digits of account number 4 4 7 0	\$615.73
	3601 ALGONQUIN RD. STE 232	When was the debt incurred? 04-08-13	
	ROLLING MEADOWS 11. 60008	As of the date you file, the claim is: Check all that apply.	1
	ROLLING MEAOOWS 16 6008 City State ZIP Code	™ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	5 5 5
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	:
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	a company of
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	de participa de la compactica de la comp
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify MEDICAL	
	M No Yes	Outer, Specify (1)21)1CP(C)	The state of the s

Æiled 04/19/16

6 Entered 04/19/16 16:57:09 Desc Main Page 45 of 72 number (# known)

Part 3:

List Others to Be Notified About a Debt That You Already Listed

z, men ne	if a collection a st the collection creditors here. If	agency nere. Sin	Mariv. If you hav	sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
None				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check and) D. Bert 4. Condition with D. V. V.
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim
				Last 4 digits of account number
City Antoniorionispianio-pioniopi	populación i patricipa esta i recentra esta interest	State 	ZIP Code	
Name		·		On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured
W				Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		· · · · · · · · · · · · · · · · · · ·	☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
		·	The second secon	Claims
City	manya — manya si salahagan kajagayan yan sa mana sa ma	State State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
iumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
***************************************				Claims
Dity		State	710.0-1-	Last 4 digits of account number
errement vermen kasarren	initerative galantiske oppståriske oppståre star ett i kvis använderen vinstalere, eng	State	ZIP Code	
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
•				
lumber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
				Claims
ity	***************************************	State	ZIP Code	Last 4 digits of account number
+	×1944 = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0000	Mindfulled designation of the control of the contro

Part 4:

Add the Amounts for Each Type of Unsecured Claim

ŝ.	Total the amounts of certain types of unsecured claims	. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
	Add the amounts for each type of unsecured claim.	, , , , , , , , , , , , , , , , , , , ,

		Total claim
Total claims	6a. Domestic support obligations	6a. <u>\$</u>
from Part 1	6b. Taxes and certain other debts you owe the government	6b. <u>\$</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +s
	6e. Total . Add lines 6a through 6d.	6e. s
		Total claim
Total claims	6f. Student loans	6f. \$ 4289.65
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <u>O</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _{\$}
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + _{\$}

Case 16-13338 Doc 1 Filed 04/19/16 Entered 04/19/16 16:57:09 Desc Main Page 47 of 72 Document Fill in this information to identify your case: Debtor Debtor 2 (Spouse If filing) First Name Middle Name United States Bankruptcy Court for the: District of Case number (If known) Check if this is an amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. Person or company with whom you have the contract or lease State what the contract or lease is for 2.1 Name Number Street City State ZIP Code Name Number Street City State ZiP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street

State

ZIP Code

City

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Debtor 1

First Name Middle Name Last Name

Case number (if known)

		Additional P	age if You H	ave More Contrac	ts or Leases	AND THE ARMS IN A STATE OF THE	
1	Person	or company w	rith whom you	have the contract or	lease	What the contract or lease is for	
2.						and the state of the factor of the state of	
1	Name						
	Number	Street		III I I I I I I I I I I I I I I I I I			
	City		State	ZIP Code			
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	Name						
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remod	Name						
	Number	Street					
	City		State	ZIP Code			

		04/19/16 16:57:09 Desc Main
Fill in th	is information to identify your case:	of 72
	AS S (2) 50 - 30 - 2	
Debtor 1	First Name Middle Name Last Name	
Debtor 2 (Spouse, if	filing) First Name Middle Name Last Name	
-	ates Bankruptcy Court for the: District of	
	(State)	
Case num (If known)	iner	☐ Check if this is a
		amended filing
Officia	al Form 106H	
Sche	dule H: Your Codebtors	12/15
	s are people or entities who are also liable for any debts you may have. Be a	
people are	filling together, both are equally responsible for supplying correct informat	ion if more snace is needed convite Additional Page fi
name and	number the entries in the boxes on the left. Attach the Additional Page to the case number (if known). Answer every question.	his page. On the top of any Additional Pages, write your
4 . Do		
1. Do yo	u have any codebtors? (If you are filing a joint case, do not list either spouse as	a codebtor.)
;	n the last 8 years, have you lived in a community property state or territory?	(Community property states and territories
includ	le Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas	s, Washington, and Wisconsin.)
	o. Go to line 3.	
	es. Did your spouse, former spouse, or legal equivalent live with you at the time?	
	No	-
	Yes. In which community state or territory did you live?	Fill in the name and current address of that person.
	Name of your spouse, former spouse, or legal equivalent	
	Number Street	
	City State ZIP Code	
3. In Col	umn 1, list all of your codebtors. Do not include your spouse as a codebtor	if your spouse is filing with you. List the person
show	n in line 2 again as a codebtor only if that person is a guarantor or cosigner.	Make sure you have listed the creditor on
Sched	tule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule tule E/F, or Schedule G to fill out Column 2.	e G (Official Form 106G). Use Schedule D,
93.54.5	Para ang ang ang ang ang ang ang ang ang an	Na katalangan katalan na matalangan pangan katalan ang mana at katalan sa katalan sa katalan katalan katalan k
Colui	nn 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:
3.1		Schedule D, line
Name		Schedule E/F, line
Numb	er Street	☐ Schedule G, line
City	Class	
3.2	State ZIP Code	
Name		Schedule D, line
****		☐ Schedule E/F, line
Numb	er Street	☐ Schedule G, line
City	State ZIP Code	
3.3		
Name		Schedule D, line
Numb	er Street	Schedule E/F, line
		☐ Schedule G, line
City	State ZIP Code	
		the commence of the control of the c

First Name Middle Name Last Name Pocument

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Case number (# known)

Additional Page to List More Codebtors

Column	1: Your codebtor			Column 2: The creditor to whom you owe the del
- (***) -]				Check all schedules that apply:
Name				□ Schedule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City	**************************************	State	ZIP Code	
Name				Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
Name				☐ Schedule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
Name			TRATEGORIA DE LA CONTRATA DE LA CONT	Schedule D, line
(tarrio				☐ Schedule E/F, line
Number	Street			Schedule G, line
City	personal and a sustain restaurance or a contract of the sustain and a sustain and a sustain and a sustain and a	State	ZIP Code	
Name				Schedule D, fine
realise				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	
				☐ Schedule D, line
Name				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	
		A Section Control of the Control of		
Name				☐ Schedule D, line
				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	
Name				☐ Schedule D, line
				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	

Case 16-13338 Doc 1 Filed 04/19/16 Entered 04/19/16 16:57:09 Desc Main Page 51 of 72 Document Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: District of (State) Check if this is: (if known) An amended filing A supplement showing postpetition chapter 13 income as of the following date: Official Form 1061 MM / DD / YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part B **Describe Employment** 1. Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one job. attach a separate page with Employment status ☐ Employed information about additional Employed employers. Not employed ■ Not employed Include part-time, seasonal, or self-employed work. Occupation Occupation may include student or homemaker, if it applies. Employer's name Employer's address Number Street Number Street City State ZIP Code City State ZIP Code How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 2 or For Debtor 1 non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. 3. Estimate and list monthly overtime pay. Calculate gross income. Add line 2 + line 3.

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Case r

Debtor 1

Case number (if known)_

		For Debtor 1	For Debtor 2 or non-filing spouse	
y line 4 here	👈 4.	\$	\$	
all payroll deductions:			*	
Tax, Medicare, and Social Security deductions	50	•	ф.	
Mandatory contributions for retirement plans	5a.	~ ~	\$	
Voluntary contributions for retirement plans	5b.	73	\$	
Required repayments of retirement fund loans	5c.	<u> </u>	\$	
Insurance	5d.		\$	
Domestic support obligations	5e.	\$ <u> </u>	\$	
	5f.	\$ <u> </u>	\$	
Union dues	5g.	\$	\$	
Other deductions. Specify:	5h.	+\$	+ \$	
the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	5h. 6.	\$ <u></u>	\$	
culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$	
all other income regularly received:				
Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <u> </u>	\$	
Interest and dividends	8b.	s ()	\$	
Family support payments that you, a non-filing spouse, or a depend regularly receive		V	Ψ	
include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
Jnemployment compensation	8d.	\$	\$	
Social Security	8e.	\$ <i>O</i>	\$	
Other government assistance that you regularly receive notude cash assistance and the value (if known) of any non-cash assistate hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ance 8f.	\$ <i>Ô</i>	\$	
Panalan av satismus times at the same times at t		/3	Y	
Pension or retirement income	8g.	\$	\$	
Other monthly income. Specify:	8h.	+ <u>\$</u>	+\$	
all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
late monthly income. Add line 7 + line 9. ne entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ <u>O</u> +	\$=	\$
all other regular contributions to the expenses that you list in Sche e contributions from an unmarried partner, members of your household, s or relatives.	ι e dule J . your de	ependents, your roomm	nates, and other	
t include any amounts already included in lines 2-10 or amounts that are	e not ava	ailable to pay expenses	s listed in Schedule J.	
ý.			11. 🛨	s ()
ne amount in the last column of line 10 to the amount in line 11. The		is the combined month		-
that amount on the Summary of Your Assets and Liabilities and Certain	Statistic	al Information, if it ann	liy income. lies 12.	s_ <i>(</i>)
			14.	Combined
ou expect an increase or decrease within the year after you file this				monthly incor

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	Document	1 age 33 01 72		
Fill in this information to id	entify your case:			
Debtor 1 Anne	Elizabeth Beave	Check if t	his is:	
Debtor 2 (Spouse, if filing) First Name	Middle News		nended filing	
United States Bankruptcy Court for	Middle Name Last Name District of	☐ A sup	plement showing pos	tpetition chapter 13
Case number		(State) expen	ses as of the following	g date:
(If known)		MM / C	DD / YYYY	
Official Form 106]			
Schedule J: \	Your Expenses			12/15
Be as complete and accurate information. If more space is (if known). Answer every ques	as possible. If two married people are fil needed, attach another sheet to this forn stion.	ing together, both are equally n. On the top of any additional	responsible for supply pages, write your nam	ing correct e and case number
Part 1: Describe Your	Household			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live	in a separate household?			
☐ No				
Yes. Debtor 2 mi	ust file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	₩ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents' names.			***	□ No □ Yes
				☐ No
				Yes
				O No
				☐ Yes
				☐ No ☐ Yes
				☐ No
				Yes
 Do your expenses include expenses of people other the yourself and your dependen 				
Part 2: Estimate Your Or	ngoing Monthly Expenses			
	your bankruptcy filing date unless you ar	re using this form as a suppler	nent in a Chanter 12 or	esa to reno-t
expenses as of a date after the applicable date.	bankruptcy is filed. If this is a suppleme	intal Schedule J, check the box	cat the top of the form	and fill in the
	non-cash government assistance if you		475-artigan	
	ided it on Schedule I: Your Income (Official)	,	Your expen	SES
any rent for the ground or lot.	nip expenses for your residence. Include to	rirst mortgage payments and	4. \$	<u> </u>
If not included in line 4:			^	
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's,			4b. \$	And the second s
	air, and upkeep expenses		4c. \$	
4d. Homeowner's association	n or condominium dues		4d. \$	

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Case number (# known)

Case number (# known)

Debtor 1

			Your expenses
5	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$
6	5. Utilities:		
	6a. Electricity, heat, natural gas	6a.	s (⁷)
	6b. Water, sewer, garbage collection	6b.	s 6
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	s
	6d. Other. Specify:	6d.	\$ 0
7.	Food and housekeeping supplies	7.	s ()
8	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	s ()
10.	Personal care products and services	10.	s O
11.	Medical and dental expenses	11.	\$ <i>(</i>)
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	s ()
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	s ()
	15b. Health insurance	15b.	\$ (2)
	15c. Vehicle insurance	15c.	\$ (*)
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$ 0
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 1061).	18.	s <i>O</i>
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	s ()
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$ <u> </u>
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	<u> </u>

Page 55 of 72 Document Debtor 1 Case number (if known) Other. Specify: Calculate your monthly expenses. 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 23b Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? M No. Yes. Explain here:

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Case 16-13338

Doc 1

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Fill in this information to identif	y your case:			
Debtor 1 Aimie &	Clizabeth Beaven	S Check if this i	e.	
Debtor 2	wilding traine Last Name	☐ An amend		
(Spouse, if filing) First Name United States Bankruptcy Court for the	Middle Name Last Name			stpetition chapter 13
Case number			as of the followin	
(If known)		MM / DD / \	YYYY	
Official Form 106J-2	·····			
Schedule J-2: I	Expenses for Sepa	rate Household o	f Debtor	2 12/15
Debtor 2 have one or more depen- only with respect to expenses for	rate household expenses ONLY IF De dents in common, list the dependent Debtor 2 that are not reported on Sc nis form. On the top of any additional	s on both Schedule J and this form hedule J. Be as complete and acc	n. Answer the quurate as possible.	uestions on this form
1. Do you and Debtor 1 maintain s	eparate households?			
No. Do not complete this for Yes	orm.			
2. Do you have dependents?	No	PLANTEN FARMANIA I I I I I I I I I I I I I I I I I I	nya nya 1743, piny 114 Pindi Wadibi a Varimanini ini ia 1415, a 147 a 47 a	ry dd y chif d a 1835 ann dandyn gyr amy ar am gyr cyr sy'r y d y da'r y rhyddiddiai y blach cu caen cae
Do not list Debtor 1 but list all other dependents of Debtor 2	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
regardless of whether listed as a dependent of Debtor 1 on Schedule J.	, ,			☐ No ☐ Yes
Do not state the dependents'				☐ No
names.				Yes
			70-10-10-14-14-14-14-14-14-14-14-14-14-14-14-14-	U No □ Yes
				□ No
				☐ Yes
				□ No □ Yes
Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	☐ No ☐ Yes	t tarifunktion minimum minimum (1967) is kast minimum minimum (1968). Maasta minimum pad		LI Yes
	ng Monthly Expenses		· · · · · · · · · · · · · · · · · · ·	
expenses as of a date after the ban	bankruptcy filing date unless you ar kruptcy is filed.	e using this form as a supplement	t in a Chapter 13 c	ase to report
nclude expenses paid for with non such assistance and have included	n-cash government assistance if you I it on <i>Schedule I: Your Income</i> (Offic	know the value of ial Form 106l.)	Your expe	nses
 The rental or home ownership e any rent for the ground or lot. 	expenses for your residence. Include t	· ·	**************************************	The Martin Mark of the Color of
If not included in line 4:		• • • • • • • • • • • • • • • • • • •		
4a. Real estate taxes		4	a. \$	
4b. Property, homeowner's, or re	enter's insurance	4	b. \$	70 min man man man man man man man man man ma
4c. Home maintenance, repair, a	and upkeep expenses	4	c. \$	
4d. Homeowner's association or	condominium dues	4	d. \$	The second secon

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Debtor 1

Amie Elizabeth Beavers

Case number (if known)_

			Your expenses
5	5. Additional mortgage payments for your residence, such as home equity loans	5.	
6	5. Utilities;		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7	Food and housekeeping supplies	7.	\$
8	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12,	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14,	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other, Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$
9.	Other payments you make to support others who do not live with you.		7
	Specify:	19.	\$
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ıe.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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*	,	Document	Page 58 of 72	.07.0	Descrivant	
Debtor 1	First Name Middle Name Las	PLAVECS st Name	Case number (# kno	wn)		_
21. Other. S	Specify:			21.	+\$	
The resu	onthly expenses. Add lines 5 throug lit is the monthly expenses of Debtor enses for Debtor 1 and Debtor 2.		22b of Schedule J to calculate the	22.	\$	\$
23. Line not u	sed on this form.					

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.	
Yes.	Explain here:

Case 16-13338 Doc 1 Filed 04/19/16 Entered 04/19/16 16:57:09 Desc Main Page 59 of 72 Document Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: (State) Case number (If known) Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 if two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Mo No Yes. Name of person_ . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 1

Date <u>04 / 6 2016</u> MM / DD / YYYY X

Signature of Debtor 2

Date

MM / DD / YYYY

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Debtor 1 Aimie Elizabeth	Beaver	5	
Debtor 2	casi Natire		
Spouse, if filing) First Name Middle Name Snited States Bankruptcy Court for the:	Last Name District of		
Case number	(State)		
lf known)			Check if this is a amended filing
			ag
fficial Form 107			
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tatement of Financial Affair			
as complete and accurate as possible. If two marricormation. If more space is needed, attach a separat	ed people are filing te sheet to this for	g together, both are equally responsible for supply m. On the top of any additional pages, write your i	ring correct name and case
mber (if known). Answer every question.			
art 1: Give Details About Your Marital State	us and Where Y	ou Lived Before	
What is your current marital status?			
☐ Married ☑ Not married			
Hormanica			
During the last 3 years, have you lived anywhere o	ther than where y	ou live now?	
₫ No			
Yes. List all of the places you lived in the last 3 ye	ars. Do not include	where you live now.	
Debtor 1:		医马克特克氏管 医克萨氏性 医克拉氏性 医二氏性 医二氏性 医二氏性 医二氏性 医二氏性 化二二烷 医二氏征 计正式 化二元烷 化二二烷烷 化二二烷烷 化二二烷烷 化二二烷烷	
	Dates Debtor 1	Debtor 2:	Dates Debtor 2
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entitie en 1990 in 199 In 1990 in 199		Debtor 2: Same as Debtor 1	lived there
Number Street	lived there	☐ Same as Debtor 1	"我们的一定,""我们就是一个大家的过去式和过去分词,我们就是一定是一个,这个人,不是一个人。"
Number Street	lived there		lived there Same as Debtor 1
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Number Street City State ZIP Code	lived there	☐ Same as Debtor 1	lived there Same as Debtor From
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City State ZIP Code	lived there	Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor From To Same as Debtor 1
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	Juzake	711 C KU	West 3
Firet Morno	Middle News		***************************************

Case number (if known)

№ No				
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tipsOperating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
e de Santana de Caracteria	ranger (n. 1945). Anna an anna an anna an anna an anna an an	And the second second second second	Operating a business	e e e e e e e e e e e e e e e e e e e
For last calendar year: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips ■ Operating a business	\$	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$
For the calendar year before that:	☐ Wages, commissions,	A.	☐ Wages, commissions,	
(January 1 to December 31, 2014)	bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
Include income regardless of whether that inc and other public benefit payments; pensions; winnings. If you are filing a joint case and you _ist each source and the gross income from e	ome is taxable. Examples rental income; interest; div have income that you rece	of other income are alimidends; money collected ived together, list it only	l from lawsuits; royalties; an once under Debtor 1.	ecurity, unemployment d gambling and lottery
Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e	ome is taxable. Examples rental income; interest; div have income that you rece	of other income are alimidends; money collected ived together, list it only	l from lawsuits; royalties; an once under Debtor 1.	iecurity, unemployment, d gambling and lottery
— ·· ·	ome is taxable. Examples rental income; interest; div have income that you rece	of other income are alimidends; money collected ived together, list it only	l from lawsuits; royalties; an once under Debtor 1.	iecurity, unemployment, d gambling and lottery
Include income regardless of whether that inc and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e No	ome is taxable. Examples rental income; interest; div have income that you receath source separately. Do	of other income are alimidends; money collected ived together, list it only	I from lawsuits; royalties; an once under Debtor 1. you listed in line 4.	Gross income from each source (before deductions)
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Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you list each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	ome is taxable. Examples rental income; interest; div have income that you receath source separately. Do Debtor 1	of other income are alimidends; money collected eived together, list it only not include income that Gross income from each source (before deductions and	from lawsuits; royalties; an once under Debtor 1. you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you list each source and the gross income from e No Yes. Fill in the details.	ome is taxable. Examples rental income; interest; div have income that you receath source separately. Do Debtor 1	of other income are alimidends; money collected eived together, list it only not include income that Gross income from each source (before deductions and	from lawsuits; royalties; an once under Debtor 1. you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
Include income regardless of whether that include income regardless of whether that included and other public benefit payments; pensions; winnings. If you are filing a joint case and you be accepted and the gross income from existence of the last calendar year: (January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2015)	ome is taxable. Examples rental income; interest; div have income that you receath source separately. Do Debtor 1	of other income are alimidends; money collected eived together, list it only not include income that Gross income from each source (before deductions and	from lawsuits; royalties; an once under Debtor 1. you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e No No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	ome is taxable. Examples rental income; interest; div have income that you receath source separately. Do Debtor 1	of other income are alimidends; money collected eived together, list it only not include income that Gross income from each source (before deductions and	from lawsuits; royalties; an once under Debtor 1. you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and

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Case number (# known)	

Part 3:

List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are either	Debtor	1's (or Debt	or 2's	debts	primarily	/ consumer	debts?
----	------------	--------	-------	---------	--------	-------	-----------	------------	--------

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Creditor's Name			THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O	\$	\$	☐ Mortgage
Citation & Huma						☐ Car
Number Street			**************************************			Credit card
						Loan repayment
***************************************						☐ Suppliers or vendors
City	State	ZIP Code				Other
					Maria Ma	
				\$	\$	☐ Mortgage
Creditor's Name						☐ Car
Number Street						Credit card
						Loan repayment
						Suppliers or vendors
City	State	ZIP Code				Other
	4 4 4 4			\$	s	☐ Mortgage
Creditor's Name					PPUPAPAPARAA	☐ Car
						Credit card
Number Street						Loan repayment
***************************************						Suppliers or vendors
						Other
City	State	ZIP Code				- Other

Aimie Elizabeth Debtor 1 Case number (if known 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. M No Yes. List all payments to an insider. Dates of Total amount Amount you still Reason for this payment payment paid Insider's Name Number Street City State ZIP Code Insider's Name Number Street State ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Include payments on debts guaranteed or cosigned by an insider. Mo No Yes. List all payments that benefited an insider. Dates of **Total amount** Amount you still Reason for this payment payment Include creditor's name Insider's Name Street Insider's Name Street Number City State ZIP Code

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Aim	ie Eliza	ibeth '	Beavers
First Name	Middle Name	Last Mac	74

Case number (# known)

hin 1 year before you filed for bankr all such matters, including personal ir contract disputes.	ruptcy, were you njury cases, sma	i a party in any la I claims actions, di	wsuit, court action vorces, collection s	n, or administ suits, paternity	rative proceed actions, suppo	ling? rt or custody modificati
No						
Yes. Fill in the details.						
	Nature of t	ie case	Court or ag	ency		Status of the case
Case title			Court Name			— Pending
			Court Hame			On appeal
	THE STATE OF THE S		Number Stree	et		Concluded
Case number			: :			
			City	State	ZIP Code	
	1		de la constante de la constant			
Case title			Court Name			Pending
						On appeal
Casa number			Number Stree	et		Concluded
Case number			City	State	ZIP Code	
No. Go to line 11. Yes. Fill in the information below.		N. N. SENSON NO. NO. NO. N.	e (1888 - 1888) en 1882 (1888 - 1884) en 1	en di enderne.	and the first section of the section	e North Charles (North Charles)
	, , , , , , , , , , , , , , , , , , ,	escribe the propert			Date	Value of the property
es. Fill in the information below.		escribe the propert			Date	Value of the property
es. Fill in the information below.		escribe the propert			Date	Value of the property
res. Fill in the information below. Creditor's Name		escribe the propert	ed		Date	Value of the property
res. Fill in the information below. Creditor's Name		escribe the propert	ed epossessed.		Date	Value of the property
res. Fill in the information below. Creditor's Name		xplain what happend Property was re Property was for Property was go	ed epossessed. preclosed. arnished.		Date	Value of the property
Yes. Fill in the information below. Creditor's Name Number Street		xplain what happend Property was re Property was for Property was go	ed epossessed. preclosed.	levied.	Date	Value of the property
Yes. Fill in the information below. Creditor's Name Number Street	E E C C C C C C C C C C C C C C C C C C	xplain what happend Property was re Property was for Property was go	ed epossessed. oreclosed. arnished. ltached, seized, or l	levied.	Date Date	Value of the property \$
Yes. Fill in the information below. Creditor's Name Number Street	E E C C C C C C C C C C C C C C C C C C	xplain what happend Property was re Property was fo Property was go Property was a	ed epossessed. oreclosed. arnished. ltached, seized, or l	levied.		Value of the property \$
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Creditor's Name City State Zi Creditor's Name	IP Code	xplain what happend Property was re Property was go Property was all Property was all Property was all Rescribe the property	ed epossessed. preclosed. arnished. Itached, seized, or I	levied.		Value of the property \$
Creditor's Name City State Zi Creditor's Name	E C C C C C C C C C C C C C C C C C C C	xplain what happen Property was re Property was g Property was a Property was a Property was a	ed epossessed. oreclosed. arnished. itached, seized, or I	levied.		Value of the property
Creditor's Name City State Zi Creditor's Name	IP Code	xplain what happend Property was for Property was an escribe the property was respectively	ed epossessed. ereclosed. arnished. ltached, seized, or I	levied.		Value of the property

Document Page 65 of 72 Limie Elizabeth Debtor 1 Case number (if know 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street City ZIP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? M No Yes **List Certain Gifts and Contributions** Part 5: 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you

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Circle Man	Ministra Managara	1 4 4 7	

Case number (if known)_____

No.			
Yes. Fill in the details for each gift or con	tribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
			¢
Charity's Name			Ψ
			\$
lumber Street			
City State ZIP Code			
List Certain Losses			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	
Describe the property you lost and how the loss occurred	Include the amount that insurance has paid. List pending insurance	Date of your loss	
Describe the property you lost and how the loss occurred List Certain Payments or Trans	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	
List Certain Payments or Transin 1 year before you filed for bankrupt	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers cy, did you or anyone else acting on your behalf pay or transf		\$
List Certain Payments or Transin 1 year before you filed for bankruptosulted about seeking bankruptcy or prode any attorneys, bankruptcy petition pre	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers cy, did you or anyone else acting on your behalf pay or transf	er any property to	\$
List Certain Payments or Transin 1 year before you filed for bankrupts sulted about seeking bankruptcy or pre	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. sfers cy, did you or anyone else acting on your behalf pay or transfeparing a bankruptcy petition? sparers, or credit counseling agencies for services required in you	er any property to	\$
List Certain Payments or Transin 1 year before you filed for bankrupts sulted about seeking bankruptcy or prode any attorneys, bankruptcy petition predo	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers cy, did you or anyone else acting on your behalf pay or transfeparing a bankruptcy petition?	er any property to	\$anyone you
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Debtor	4
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			3	
Aim	ie Elizabeth	Beavers	Case number (if known)	
iret Nama	Middle Manie	act tioms		

		transfer was made	payment
Person Who Was Paid		TO THE PARTY PARTY	\$
Number Street			
			\$
City State ZIP Code			
Email or website address	· 		
Person Who Made the Payment, if Not You			
•	tcy, did you or anyone else acting on your behalf pa tors or to make payments to your creditors? ou listed on line 16. Description and value of any property transferred	Date payment or	Amount of payme
Person Who Was Paid		transfer was made	
Number Street		***************************************	\$
			\$
City State ZIP Code	13		
transferred in the ordinary course of your	made as security (such as the granting of a security into		
Include both outright transfers and transfers r Do not include gifts and transfers that you have No Yes. Fill in the details.	Description and value of property Describe an	ly property or payments received	
Do not include gifts and transfers that you have No	Description and value of property Describe an or debts pai	y property or payments received id in exchange	Date transfer was made
Do not include gifts and transfers that you have No Yes. Fill in the details.	Description and value of property transferred Describe an or debts pai	ly property or payments received d in exchange	
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A		·5)			
//	Medizals	Barre Dale			
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City Common Age					

Case number	(if known)

No			
Yes. Fill in the details.			
	Description and value of the proper	ty transferred	Date transfer
			was made
Name of trust			
	: - i		
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8: List Certain Financial Account	ts, Instruments, Safe Deposit	Boxes, and Storage Units	
	cy, were any financial accounts or	instruments held in your name, or for your b	enefit,
osed, sold, moved, or transferred? clude checking, savings, money market.	or other financial accounts: certif	icates of deposit; shares in banks, credit uni	ons.
okerage houses, pension funds, cooper			0113,
No			
Yes. Fill in the details.	Anna an ing kanalang ang kanalan Anna ang kanalang a	Description of the state of t	The Analysis of Caracas
	Last 4 digits of account number	Type of account or Date account was instrument closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution	VVVV	Checking	ė
	XXXX	Savings	4
Number Street		Money market	
***************************************		☐ Brokerage	
City State ZIP Code		Other	
	NAME .	D objection	•
Name of Financial Institution	XXXX	☐ Checking	\$
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		*	
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		and the second design of the second s	£
o you now nave, or did you nave within 1 ecurities, cash, or other valuables?	year before you filed for bankrupto	cy, any safe deposit box or other depository	TOF
No			
Yes. Fill in the details.			
	Who else had access to it?	Describe the contents	Do you still have it?
	Contract of the Artist Artist Contract Artist		
			□ No
Name of Financial Institution	Name		☐ Yes
Name of Financial Institution Number Street	Name Number Street		3

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Debtor	4	
DEDIDE	٤	

Aimi	25:13.9	beth Beavers	
First Name	Middle Name	1 act Name	

Case number	(if known)	

	Yes. Fill in the details.			
		Who else has or had access to it?	Describe the contents	Do you still have it?
	Name of Storage Facility	Name		□ No □ Yes
	were the second			
	Number Street	Number Street		· vord trochess from the de
	***************************************	CityState ZIP Code		as congregation and
	City State ZIP Code			THE PARTY OF THE P
art	Identify Property You Hold	or Control for Someone Else		
	you hold or control any property that s hold in trust for someone.	omeone else owns? Include any property yo	u borrowed from, are storing for,	
Z	No			
Ц	Yes. Fill in the details.	Where is the property?	Describe the property	/alue
		Trigite to the property () which has a support of	Describe the property	aluc
	Owner's Name		\$	
	Number Street	Number Street		
	City State ZIP Code	City State ZIP Code		
Part				
or th En ha: inc	Give Details About Environs e purpose of Part 10, the following definitionmental law means any federal, state ardous or toxic substances, wastes, or luding statutes or regulations controlling means any location, facility, or proper	mental Information nitions apply: te, or local statute or regulation concerning promaterial into the air, land, soil, surface watering the cleanup of these substances, wastes, ty as defined under any environmental law, v	er, groundwater, or other medium, or material.	
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Debtor	4	
Denior	ł	

Aim	ne Eliza	beth Beavers
First Name	Middle Name	Last Name

Case number (# known)_____

Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notic
			annin manakan kanan dan manakan dan
Name of site	Governmental unit	The state of the s	
Number Street	Number Street	The second secon	
***************************************	City State ZIP Code		
City State ZIP Code			
	idministrative proceeding under any	environmental law? Include settlements ar	nd orders.
No			
Yes. Fill in the details.			Status of th
	Court or agency	Nature of the case	case
Case title	NON-PERIOD CONTROL CON		Pending
	Court Name	oocur	On appe
***************************************	***************************************	<u></u>	Conclud
	Number Street	:	Conclud
Case number	City State ZIP Cod		
hin 4 years before you filed for bankri		e any of the following connections to any l	business?
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Debtor 1

Alm	13,91	izabeth.	Beavers
First Name	Middle Name	Last Nam	e

Case number (if known)_____

	Describe the nature of the business	Employer Identification number
Business Name		Do not include Social Security number or ITIN.
Business Name		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
		From To
City State ZIP Code		
28. Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to anyo	one about your business? Include all financial
50 No		
Yes, Fill in the details below.		
	Date issued	
	establishmen en e	
Name	MM / DD / YYYY	
Number Street		
City State ZIP Code		
Oity State 211 South		
Part 12: Sign Below		
I have read the enough on this Statemen	nt of Financial Affairs and any attachments, an	nd I declare under penalty of periury that the
answers are true and correct. I understar	nd that making a false statement, concealing p	property, or obtaining money or property by fraud
in connection with a bankruptcy case car 18 U.S.C. §§ 152, 1341, 1519, and 3571.	result in fines up to \$250,000, or imprisonme	ent for up to 20 years, or both.
10 0.0.0. 93 102, 1041, 1010, and 00111		
* Mu Jean		
Signature of Debtor 1	Signature of Debtor 2	
Date 04-10-2016	Date	
	Statement of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form 107)?
_4		
☑ No □ Yes		
Did you nay or agree to nay someone wh	o is not an attorney to help you fill out bankru	ptcy forms?
Mo	o not an account to holp you mi our banking	**************************************
		Attach the Bankruptcy Petition Preparer's Notice,
		Declaration, and Signature (Official Form 119).

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Fill in this in	formation to identify	your case:	
Debtor 1	<u>Aime</u>	ELIZADETA Middle Name	Beavers Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:		District of(State)
Case number (If known)			(State)

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7 12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part H. List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	,
Scouling dopt.	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
sociality dobt.	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
accuracy docu	Retain the property and [explain]:	